

My view is that we are going to have our bill on this floor with a full debate and an up-or-down vote, and that will come as a result of Senator REID keeping his commitment. I am convinced of that.

I yield the floor.

The PRESIDING OFFICER (Mr. KAUFMAN). The Senator from Arizona.

Mr. MCCAIN. Very briefly, I say to Senator DORGAN, I appreciate his efforts, his leadership. I appreciate everything he has done. We have had the privilege of working together on many issues over the years. I wish to be sure that when the health reform bill comes up, there will not be parliamentary obstacles from that happening. I have seen the will of the majority thwarted on the floor of the Senate by certain parliamentary maneuvers—filling up the tree, for example. The Senator from North Dakota is as familiar as I am with some parliamentary procedures which can be employed by the majority and have been employed when both parties have been in the majority to thwart the ability of Senators to have their issues considered. That is what I want to see, is to make sure that when the health reform bill is before us, we will take it up.

But the sentence reads:

If this issue is not addressed during the full Senate's consideration of comprehensive reform . . .

My question is, why wouldn't it? Why is that sentence necessary? All I can say is that I hope we can get that assurance. If we do, I will withdraw the amendment and allow this appropriations bill to receive full consideration and be passed by the Senate.

Mr. DORGAN. Mr. President, I intend to offer several amendments to the health care bill. I have not had a chance. I am not part of a gang of anything. I wasn't part of the Gang of 6. I am not part of the Finance or HELP Committees. This is my first opportunity. I have some things I think can improve it. If a bill comes to the floor with procedures—and it will not happen—that lock this up and we can't offer amendments, I wouldn't stand for that. I am not going to be a part of that process. My expectation and the representation made to me with respect to this amendment is when that bill comes to the floor, we will have an opportunity to offer amendments. I don't know how you would get health care through the Senate if the proposition would be that somebody says: The Gang of 6, they had their 6 months or 3 months, whatever they did. And the two committees had their opportunity. But the rest of you, sorry, can't do that. In that circumstance, health care would not be passed through the Senate. Perhaps we have tortured this subject to death.

Mr. MCCAIN. We have probably tortured it to death. Considering the fact that reconciliation continues to be held out there as an option by the majority is also a factor about which I have been concerned. All we need is a clarification to make sure there will be no parliamentary obstacles to consid-

eration of the amendment of the Senator from North Dakota, an effort joined by me and Senator SNOWE and others, to allow prescription drugs to be imported into the United States.

I yield the floor.

Mr. DORGAN. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. BURRIS. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. BURRIS. Mr. President, I ask unanimous consent to speak as in morning business.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### HEALTH CARE REFORM

Mr. BURRIS. Mr. President, my brief remarks this morning are going to be on the cost of our broken health care system.

There have been times throughout our Nation's history when the American people have called upon our elected leaders to make very difficult decisions. This is one of those moments.

The debate over health reform has taken hold of this country and this Congress. We need a public option as part of any reform legislation, and we need it now. But the debate goes on. In House and Senate committee hearings, in townhall meetings, and at dining room tables across America, people are talking about the cost of health care reform. But they are not just talking about dollars and cents. Sometimes Washington forgets that. We worry about taxes, the deficit, and the need to keep Federal spending in check. We are right to debate these issues. But in the swirl of numbers and the cold analysis of insurance profits, we must not forget the extraordinary human cost of our broken health care system.

Nearly 45,000 Americans die every year because they do not have insurance coverage and cannot get quality care. That is one death every 12 minutes. This simply cannot stand in the United States of America. As Members of the Senate, as Americans, and as human beings, we cannot allow this to continue. It is time to take bold action. We must not delay any longer. The American people are waiting—people such as Deborah, a mother from Illinois, who works for a social service agency. Her employer had to cancel health care benefits and cut salaries more than a year ago because the expenses were too high. Deborah had a heart attack in April. Her resulting hospital bills total almost \$16,000. She cannot afford the medicine her doctors have prescribed for her. And now she is having trouble paying bills. Her gas and electricity have already been cut off in her home. Next it is going to be the water.

Thankfully, Deborah's children and foster children have health insurance provided under an Illinois program called All Kids. But what if she suffers further complications or another heart

attack? What if she loses her home or her job? What will happen to Deborah and her family?

If this Congress does not pass meaningful health care reform, their future is uncertain at best. But if we do act, we can bring Deborah and her family back from the brink of ruin. If we pass health care reform with a public option, Deborah and millions like her will be able to get the quality care they need at a price they can afford.

Under a public plan, health care costs will come down. Perhaps Deborah's employer will be able to restore her insurance coverage. But if not, she will be able to get individual coverage by choosing between an affordable private or public plan. Competition will drive premiums down across the board, making insurance more affordable for every single American. This means even with a preexisting condition, Deborah will not have to worry about finding good coverage at a fair price. She will be able to pay her bills again. In case she needs further treatment down the road, she will not be forced to choose between keeping food on the table or seeking the quality care she deserves. That is what health care reform is with a public option, and that is what could help Deborah.

These reforms would also help working folks such as Scott and Cindy, a self-employed couple from Oak Park, IL. Scott is a carpenter, and Cindy is a freelance writer and editor. They have a combined income that ranges from \$50,000 to \$120,000 per year, depending on the economy. But Scott has a preexisting condition.

Unlike many people in similar situations, they were fortunate enough to find an insurance company that would cover them. But the costs are extremely high. Premiums run more than \$500 a month. Scott is covered by one plan, and Cindy and the kids are on a separate plan, and each one has a deductible of about \$5,200 a year. That is the deductible.

That is why Scott and Cindy were so worried when their son broke his arm last summer. It was a bad break, but it is the kind of injury that is common to an active 15-year-old kid. It was not catastrophic, it was not unusual, and no one's life was at stake. But the medical bills totaled about \$4,000. Even though Scott and Cindy have insurance, they had to pay every cent of this out of their pockets.

They are underinsured, and they know it. That is why they ration their own health care. I will repeat that: That is why they ration their own health care. Whenever they can skip a doctor's visit, or a checkup, or a minor procedure, they will do so in the interest of saving money. Of course, when their kids need treatment, they make it a priority.

But Scott and Cindy know they will not be able to afford it if either of them gets sick. What will happen to this family if they experience a catastrophic illness? What will happen if their coverage gets dropped, or if the costs continue to go up?

With health care reform, private insurers could no longer discriminate